

State of Washington Application for a Water Right

For Ecology Use Fee Faid

Please follow the attached instructions to avo	old unnecessary delaysoger office 41-518				
Section L. APPLICANT - PERSON, ORGA	NIZATION, OR WATER SYSTEM				
1 - Kahert Ey Lavett	Home Tel: (509) 488 - 9066				
TELIE KANDENION KA	Work Tel: (
	934/4 FAX: ()				
	*				
Section 2. CONTACT - PERSON TO CALL Same as above	ABOUT THE APPLICATION				
Name Donald Stratson	Home Tel: (509) 488 - 9066				
Mailing Address 1200 JUNIDER Rd.	Work Tel: () - 4314				
City Othe 110 State Wa Zip+4 993					
Relationship to applicant	<i></i>				
Relationship to applicant	<u> </u>				
Section 3. STATEMENT OF INTENT	Ich				
The applicant requests a permit to use not more than Composition					
Check if the water use is proposed for a short-term pro	ject. Indicate the period of time that the water will be needed:				
From 4 1 1 to 181 157					
From 4 1 1 to 201/51					
Section 4 WATER SOURCE					
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ECY 040-1-14

Appl. No.: 5 330316

Sec	ction 5. GENERAL WATER SYSTEM INFORMATION		
A.	Name of system, if named:		
B.	Briefly describe your proposed water system. (See instructions.)		
C.	Do you already have any water rights or claims associated with this property or system PROVIDE DOCUMENTATION.	tem? YES	S 🗆 NO
0664100555666	ction 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM IN ompleted for all domestic/public supply uses.)	FORMATION	
A.	Number of "connections" requested: Type of connection		
_	(Homes, A	Apartment, Recreation	
В.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water County Health Department.	☐ YES r systems are identifi	
Cor	nplete C. and D. only if the proposed water system will have fiftee	n or more conn	ections.
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please attach the current at	☐ YE.	
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current a	☐ YE	
000000000000000000000000000000000000000	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMA' ompleted for all irrigation and agriculture uses.)	LION	
A.	Total number of acres to be irrigated:		
B.	List total number of acres for other specified agricultural uses:	8	
	Use Acres		
	Use Acres Use Acres		
C.	Total number of acres to be covered by this application:		
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977) Add up the acreage in which you have a controlling interest, including only:	21 U ,	
	‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).		
	 Is the combined acreage greater than 2000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no.: 	□ YE □ YE	2 3
E.	Farm uses: Stockwater - Total # of animals Animal Type	_(If dairy cattle, see	below)
	Dairy - # Milking # Non-milking		3

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES ☑ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site. Sent West of Othello City limits on Curry to west sides of BU.S.B.R. Canaly then Sour ditch, 34 mile to East End of property. to Pond.	lengham Rd Abron Canal Rook West
ditch, 3/4 mile to East End of property.	,,,,,,

Section 10. REQUIRED MAP

Attach a map of the project. (See instructions.)

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A.	Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide the name(s) and address(exof the owner(s):	YES	□NO
В.	Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:	YES	□NO

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Donald F. Som Applicant (or authorized representative)	Date 23, 1988
Landowner for place of use (if same as applicant, write "same")	Date
zandowner for place of use (if same as applicant, write same)	There examined this application

as required by SEPA and find that

it is: I not an "action"

APPLICATION

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):				
Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128			
Section number(s)is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE			
Explanation: Assignment needed for new land owners property sold to Robert & Cynthia Dovel Please provide the additional information requested above and return your application by 10-6-00 (date).				

Findy A. Christian Date 9-6-00

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).